

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4	1					
5	1					
6	1					
7		1				
8	1					
9	1					
10		1				
11		1				
12	1					
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49						
50						
TOTAL IND.	10		↓		↓	↓
TOTAL DEP.	6		←		←	←
TOTAL CLAIMS	16					

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
51								
52								
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100								
TOTAL IND.			↓		↓			
TOTAL DEP.			←		←			
TOTAL CLAIMS								

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

**BEST AVAILABLE COPY**